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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. HR1.045

First Inventor or Application Identifier Krishnamurthy

Title Scalable Unidirectional Routing with Zone Routing Protocol Extensions

Express Mail Label No. ET232408732US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. ☒ Specification [Total Pages 51]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 7]

4. Oath or Declaration [Total Pages]

- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
- i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.21), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.141).

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Copy
- b. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement of Attorney (when there is an assignee)
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
13. ☐ Small Entity Statement(s) ☐ Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

| | | | | | | |
|---------|----------------------------------|-----------|----------------|----------|----------------|--|
| Name | Cary Tope-McKay | | | | | |
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| Name (Print/Type) | Cary Tope-McKay | Registration No. (Attorney/Agent) | 41,350 |
| Signature | | Date | 1/18/01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) 1016.00

Complete if Known

| | |
|----------------------|---------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Krishnamurthy |
| Examiner Name | |
| Group / Art Unit | |
| Attorney Docket No. | HRL045 |

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☒ Payment Enclosed: ☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

| 1. BASIC FILING FEE | | | | |
|---------------------|--------------|----------|------------------------|-----------------|
| Large Entity | Small Entity | Fee Code | Fee Description | Fee Paid |
| 101 | 690 | 201 | Utility filing fee | |
| 106 | 310 | 206 | Design filing fee | |
| 107 | 480 | 207 | Plant filing fee | |
| 108 | 690 | 208 | Reissue filing fee | |
| 114 | 150 | 214 | Provisional filing fee | |
| SUBTOTAL (1) | | | | (\$ 710) |

| 2. EXTRA CLAIM FEES | | | |
|---------------------|--------------|----------------|----------|
| Total Claims | Extra Claims | Fee from below | Fee Paid |
| 67 | 20** | 17 | 306 |
| 6 | 3** | 0 | 0 |
| Multiple Dependent | | | |

**for number previously paid, if greater; For Reissues, see below

| Large Entity Small Entity | | | | |
|---------------------------|----------|----------|--|-----------------|
| Fee Code | Fee Code | Fee Code | Fee Description | |
| 103 | 18 | 203 | 9 Claims in excess of 20 | |
| 102 | 78 | 202 | 39 Independent claims in excess of 3 | |
| 104 | 260 | 204 | 130 Multiple dependent claim, if not paid | |
| 109 | 78 | 209 | 39 ** Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) | | | | (\$ 306) |

FEE CALCULATION (continued)

| 3. ADDITIONAL FEES | | | | |
|---------------------------|--------------|----------|---|---------------|
| Large Entity | Small Entity | Fee Code | Fee Description | Fee Paid |
| 105 | 130 | 205 | 65 Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 Non-English specification | |
| 147 | 2,520 | 147 | 2,520 For filing a request for reexamination | |
| 112 | 920* | 112 | 920* Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 Extension for reply within first month | |
| 116 | 380 | 216 | 190 Extension for reply within second month | |
| 117 | 870 | 217 | 435 Extension for reply within third month | |
| 118 | 1,360 | 218 | 680 Extension for reply within fourth month | |
| 128 | 1,850 | 228 | 925 Extension for reply within fifth month | |
| 119 | 300 | 219 | 150 Notice of Appeal | |
| 120 | 300 | 220 | 150 Filing a brief in support of an appeal | |
| 121 | 260 | 221 | 130 Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 Petition to revive - unavoidable | |
| 141 | 1,210 | 241 | 605 Petition to revive - unintentional | |
| 142 | 1,210 | 242 | 605 Utility issue fee (or reissue) | |
| 143 | 430 | 243 | 215 Design issue fee | |
| 144 | 580 | 244 | 290 Plant issue fee | |
| 122 | 130 | 122 | 130 Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 Recording each patent assignment per property (times number of properties) | |
| 146 | 690 | 246 | 345 Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 690 | 249 | 345 For each additional invention to be examined (37 CFR § 1.129(b)) | |
| Other fee (specify) _____ | | | | |
| Other fee (specify) _____ | | | | |
| SUBTOTAL (3) | | | | (\$ 0) |

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

| | | |
|---------------------------------------|--|--------------------------|
| Name (Print/Type) <i>Conrad McKay</i> | Registration No. (Attorney/Agent) 41,350 | Telephone (310) 291-0390 |
| Signature <i>[Signature]</i> | Date 1/15/01 | |

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.